

 CD-174000	NEW MEXICO CORRECTIONS DEPARTMENT	ISSUE DATE: 04/14/90 EFFECTIVE DATE: 04/14/90 REVIEW/REVISED: 10/20/04
	TITLE: Therapeutic Communities	

AUTHORITY:

Section 33-1-6. NMSA 1978 (As Amended)

REFERENCES:

- A. Strategic Action Plan for the Provision of Treatment Services for Substance Related Disorders in the New Mexico Corrections Department [17 March 2000]. DSM IV – TR “Substance - Related Disorders”;
- B. American Correctional Association Standards 3-4388-1 through 3-43884;
- C. *Therapeutic Community: Theory, Model, and Method* by George De Leon, © 2000 by Springer Publishing Co.

PURPOSE:

To establish a Therapeutic Community substance abuse program for inmates with drug and alcohol addiction problems and an overall Therapeutic Community Zone in which the Therapeutic Community program will operate. In addition, this policy is designed to assist Addiction Services staff members and inmates to better understand the goals and operation of a Therapeutic Community.

APPLICABILITY:

All employees and inmates assigned to a New Mexico Corrections Department correctional facility, especially those participating, operating or working in conjunction with the Therapeutic Community.

FORMS:

None

ATTACHMENTS:

None

DEFINITIONS

- A. Biohazards: Human body fluids or materials such as blood, semen, urine, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid and saliva that may contain blood borne pathogens.
- B. Blood Borne Pathogens: Pathogenic microorganisms that are present in human blood and fluids and can cause disease in humans. These pathogens include, but are not limited to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV). Other examples include microorganisms that cause: Hepatitis C, Malaria, Syphilis, Babesiosis, Leptospirosis, Arboviral Infections, Relapsing Fever, Creutzfeld-Jakob Disease, Human T-Lymphotropic Virus Type 1, and Viral Hemorrhagic Fever.
- C. Individual Treatment Plan (ITP): An ITP is developed within 30 days of a client's entry into any psychological treatment relationship in collaboration between the client and the treatment provider. The purpose of the Addiction Services' ITP is to establish the therapeutic treatment goals and methods as identified as requiring psychological treatment intervention through the treatment assessment instrument and interview.
- D. Program Mentors: Inmates may volunteer to serve as program mentors after completing the first three treatment programs of the Therapeutic Community treatment process and begin Program IV – Relapse Prevention. Treatment staff will make the actual selection from the volunteers.
- E. Therapeutic Community: A residential treatment program occupying a housing unit within the confines of a NMCD correctional facility that has a daily regimen of substance abuse and criminal behavior therapy within a structured living environment.
- F. Therapeutic Community Transitional/Contract Unit: A transitional/orientation unit occupying specified contractual beds within a designated living unit of a NMCD correctional facility operating a Therapeutic Community. The Therapeutic Community Transitional Unit is designated for inmates who are awaiting entry into the Therapeutic Community, inmates who have graduated from the three/four Therapeutic Community programs and are awaiting release from CNMCF on parole or discharge of sentence, and, if space permits, inmates who desire to live in a TC environment without having to join the Therapeutic Community Program itself and are willing to agree by way of contract to remain drug-free.
- G. Therapeutic Community Zone: Therapeutic Community Zone encompasses the Therapeutic Community and the Therapeutic Community Transitional / Contract Unit.

POLICY:

The New Mexico Corrections Department will provide substance abuse programs for inmates with drug and alcohol addiction problems. This includes the use of a Therapeutic Community not limited to the following components:

1. staff trained in drug and alcohol treatment that design and supervise the program;
2. the selection and use of trained former addicts and recovered alcoholics to serve as employees or volunteers in the program;
3. coordination with community substance abuse programs;
4. efforts to motivate addicts to seek help;
5. realistic goals for the rehabilitation of inmates with substance abuse problems; and
6. use of a variety of approaches to provide flexibility to meet the varying needs of different addicts.



Joe R. Williams, Secretary of Corrections
New Mexico Corrections Department

10/20/04
Date

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Policy *CD-174000*.

PROCEDURES:

A. Programs:

The Therapeutic Community Programs are designed to provide an appropriate range of primary treatment services for alcohol and other drug dependent inmates such as:

- inmate diagnosis;
- identified problem areas;
- individual treatment objectives;
- treatment goals;
- counseling needs;
- drug education plan;
- relapse prevention and management;
- culturally sensitive treatment objectives, as appropriate;
- the provision of self-help groups as an adjunct to treatment;
- pre-release and transitional service needs;
- coordination efforts with community supervision and treatment staff during the pre-release phase to ensure continuum of supervision and treatment.

B. Selection Criteria:

The Therapeutic Community is designed to assist inmates with alcohol or drug addiction issues and antisocial behavioral patterns, housed at a New Mexico Corrections Department Facility that meets the following criteria:

1. All inmates desiring admittance to the Therapeutic Community will be required to take part in a uniform interview process conducted by a member of the Therapeutic Community Addiction Services Staff. Inmates access the interview process by completing and submitting a standard Applicant Letter of Interest form that can be obtained at the facility - Addiction Services or Therapeutic Community Office.

2. The applicant must have six months or more to serve on the current or a consecutive sentence, including projected good time credits, at the time of admittance to a recognized Correctional Therapeutic Community.
3. The applicant should have less than two years to serve on the current or consecutive sentence, including projected good time credits, at the time of admittance to a recognized Correctional Therapeutic Community. Inmates that do not meet this two year requirement are still encouraged to apply, and will be selected on a case-by-case basis.
4. The applicant must meet the diagnostic criteria of any of the Substance Dependent Disorders as defined by the DSM-IV (Diagnostic and Statistical Manual of the American Psychiatric Associations)
5. The applicant must have completed the interview phase of the selection process, agree in writing to abide by the contract requirements of the Therapeutic Community, and be selected by the appropriate Addiction Services staff member as a qualified candidate for the Therapeutic Community.
6. In keeping with the established international Therapeutic Community standards which state there are two major guidelines for excluding clients [to the TC]: suitability and community risk...suitability refers to the degree to which the client can meet the demands of the TC regimen and integrate with others...[including] participation in groups, fulfilling work assignments, and living with minimal privacy in an open community...Community risk refers to the extent to which clients present a management burden to the staff or pose a threat to the security and health of the community or others; applicants who have a history of sex related criminal offense conviction(s) will be required to undergo a separate screening interview conducted by the Therapeutic Community Addiction Services staff to determine suitability and risk of TC placement.
7. Applicants must agree to random urinalysis screening during their residency in the Therapeutic Community as specified in the Therapeutic Community Contract. In addition, inmates must submit a negative urine screening prior within thirty days of placement in the Therapeutic Community.
8. All applicants must be 18 years or older at the time of admittance to the program.

C. Transferring to the Program:

1. Upon a finding that an applicant has met the criteria for the Therapeutic Community, the Addiction Services Manager, or Therapeutic Community Coordinator shall add the applicant's name to a list of qualified applicants for the Therapeutic Community. This list shall contain the following items:
 - a. applicant's name and number
 - b. Therapeutic Community Treatment Provider's signature
 - c. rank of entrance priority
2. The Therapeutic Community's Qualified Applicant Waiting List e.g. General Population to Therapeutic Community waiting list shall be up-dated as needed, and submitted to the Deputy Warden of the facility as required.
3. The Deputy Warden, of the facility, or a designee, will use the Therapeutic Community Qualified Applicant Waiting List, i.e.; General Population to Therapeutic Community waiting list, to move qualified applicants into the Therapeutic Community as vacancies becomes available if Therapeutic Community Addiction Services Staff are otherwise unavailable for consultation. Only applicants listed on the Therapeutic Community Qualified Applicant Waiting List, i.e.; General Population to Therapeutic Community waiting list should be assigned to the Therapeutic Community.
4. As vacancies occur, the Deputy Warden of the facility or the Therapeutic Community Staff will assign inmates to the Therapeutic Community, from inmate General Population as indicated by Therapeutic Community Addiction Services Staff or from the Therapeutic Community Qualified Applicant Waiting List if Therapeutic Community Addiction Services Staff are otherwise unavailable and an emergency exists.
5. The Transitional / Contract Unit will operate as a separate entity under the Therapeutic Community Umbrella. Its purpose is to provide inmates who have graduated from the TC's basic three / four program curriculum with continuity of care opportunities without return to general population. Other inmates housed in the unit may include TC mentors / cadre, accepted applicants awaiting the opening of an active programming bed preliminary and limited adjustment programming under the TC environmental umbrella, and; lastly, if space permits in the dorm, inmates who have no substance abuse history who wish to live in the TC dorm without having to program.

6. Non-programming applicants, designated as “Contracted” residents will make application for the Transitional / Contract Unit in the same manner as TC Program applicants. The only requirement that must be met to enter the Transitional / Contract Unit as a “contracted” resident is that the applicant be willing to contract with the Therapeutic Community Addiction Services staff to:
 - a. Support the philosophy, purpose, and goals of the Therapeutic Community during the entire time the inmate is a resident of the Transitional Unit.
 - b. Follow all institutional rules and maintain clear conduct during the entire time the inmate is a resident of the Transitional Unit.
 - c. Fully participate in all Transitional / Contract Unit resident meetings.
 - d. Remain drug and alcohol free and submit to urinalysis testing as requested by Addiction Services staff under the same criteria as the Therapeutic Community residents.
7. The Therapeutic Community and The Therapeutic Community Transitional / Contract Unit will collectively be referred to as the Therapeutic Community Zone.

D. Program Operation:

1. The Therapeutic Community shall be under the administration and supervision of the Addiction Services Bureau under the direction of the Facility Addiction Services Manager, TC manager, or designee.
2. The Facility Addiction Services Manager shall designate two (2) Addiction Service staff members as the Therapeutic Community Coordinators or Facilitators if available. Other qualified Addiction Services staff may be assigned as needed and will be designated as Therapeutic Community Staff. The Addiction Services Manager and /or Addiction Services Clinical Supervisor may serve as TC Coordinators where qualified staff is limited.
3. The Therapeutic Community shall operate under the guidelines expressed in the Department and Facility Therapeutic Community Resident Handbook.
4. The Facility Addiction Services Manager, or designee, shall be responsible for:
 - a. Coordinating, screening, providing and supervising all program activities planned by the assigned staff for the unit members.

- b. Serving as liaison with Education, Security, Programs, and Classification staff.
 - c. Serving as liaison between the community and outside agencies such as Adult Probation Division and referral resources.
 - d. Overseeing the clinical services provided for the program participants.
 - e. Offering training for all correctional and counseling staff involved in the Therapeutic Community. The training will focus on both the elements of the treatment program and institutional security policies and procedures. Through cross-training, all factions of the treatment team can learn to efficiently operate the unit without confusion or misunderstanding. Individual roles and responsibilities can be clarified, coordinated and integrated among various service providers.
5. Ensure that all other Mental Health Services are provided to Therapeutic Community members as provided to other inmates assigned to the general population at the facility in which the Therapeutic community is operating.
6. The Addiction Services Clinical Supervisor/Senior Counselor, under the direction and in conjunction with the Facility Addiction Services Manager, shall be responsible for:
- a. Development and implementation of a treatment program based on the social learning theory that targets the development of pro-social behavior. This includes intervention techniques that are not limited to interpersonal and cognitive problem-solving, peer oriented group therapy programs, role modeling, social skills training, and psycho--dramatization.
 - b. The use of an appropriate range of primary and secondary treatment services may include substance abuse assessment and diagnosis, problem identification, and the development of individual treatment objectives and goals.
 - c. The construction and use of treatment plans that are not limited to drug education, individual counseling, and relapse prevention/management.
 - d. The use of community resources such as Alcoholic's Anonymous and Narcotic's Anonymous to augment Therapeutic Community services.

- e. The use of institutional self-help groups, pre-release/transitional services, and community aftercare services to ensure the continuity of supervision and treatment.
- f. To implement the aims and goals of the Therapeutic Community in a manner that is aware of cultural differences and diversities.
- g. To advocate the Therapeutic Community as a psychologically supportive environment which reinforces pro-social behavior.
- h. To ensure that group therapy is the primary mode of intervention for Therapeutic Community participants.
- i. To provide individual therapy when deemed necessary. The Coordinator will coordinate the assignment of any individual therapy after consultation with the Mental Health Director. To utilize, when appropriate and available, videotape techniques with group and individual sessions. All videotapes, apparatus, equipment and tapes will be the responsibility of the Therapeutic Community staff and must be appropriately inventoried and stored after each use.

7. Programs within the Therapeutic Community /TC Process:

a. Program I: Dynamics of TC

Upon initial entry, the inmate will be in the Dynamics of TC Program of the Therapeutic Community Process for a period of not less than 3 months. Transitional / Contract Unit time does not count toward this 3 month requirement. During this initial program, the inmate is ideally to have no other responsibilities within the program other than developing understanding of the Therapeutic Community and their own treatment needs. Based upon progress evaluations and completion of assignments, the inmate may be:

- 1) Dismissed from the program.
- 2) Continued in Program I with appropriate modifications to the resident's Individual Treatment Plan (ITP).
- 3) Placed into the Program II: "Skills Development" the Therapeutic Community Process per Individual Treatment Plan.

b. Program II: “Skills Development”:

Inmates who successfully complete Program I: Dynamics of TC of the Therapeutic Community Process may be moved into the Program II “Skills Development” of the Therapeutic Community Process. Residents advanced to the Skills Development Program will remain in this program for a period of not less than six months. During this program, main TC objectives of socialization, personal growth, and psychological awareness are pursued through all of the therapeutic and community activities. Based on progress evaluations as measured by the Individual Treatment Plan and program participation during Program II, the resident may be:

- 1) Dismissed from the program.
- 2) Retained in Program II with appropriate modification to the resident’s ITP or:
- 3) Advanced to the Re-entry Program (Program III) of the Therapeutic Community Process with appropriate modification to the resident’s ITP.

c. Program III: “Re-entry”.

Residents advanced to the Re-entry Program of the Therapeutic Community process will be in Program III for a period not less than 3 months. Re-entry is the program in which the resident must strengthen skills for autonomous decision making and the capacity for self-management with less reliance on rational authorities or a well-formed peer network. Based on progress evaluations as measured by the Individual Treatment Plan and program participation during Program III, the resident may be:

- 1) Dismissed from the program.
- 2) Retained in Program III with appropriate modification to the resident’s ITP or:
- 3) Graduated from the Therapeutic Community Process with appropriate close out of the resident’s ITP or
- 4) Advanced to Program IV: “Relapse Prevention”

d. Program IV: "Relapse Prevention".

- 1) Residents advanced to the Relapse Prevention Program of the Therapeutic Community process will be in Program IV for a period not less than 3 months. Relapse prevention is the program specifically designed as the Mentor / Cadre program.
- 2) During this program, advanced residents assist the Therapeutic Community Staff in programming functions. They learn to maintain Relapse Prevention through service to the community as senior role model residents for other TC programmers. The duties and expectations of Mentors / Cadre are described in the Mentor's / Cadre Handbook.
- 3) Based on progress evaluations as measured by the Individual Treatment Plan and program participation during Program III, the resident may be:
 - a) Dismissed from the program.
 - b) Retained in Program IV with appropriate modification to the resident's ITP or:
 - c) Graduated from the Advanced Therapeutic Community Process with appropriate close out of the resident's ITP.
 - d) 90-day Individual Treatment Plan reviews will be conducted in accordance with Mental Health Services policies and Standards of Care.
 - e) The complete Therapeutic Community Treatment Process is ~~designed~~ to be of 12 to 15 months duration.

E. Therapeutic Community Housing Unit:

1. The Therapeutic Community will be located in a designated housing unit/dormitory identified solely for Therapeutic Community members. The unit/dormitory shall have designated beds available for the Therapeutic Community. These numbers maybe adjusted if the situation warrants a reduction or increase in the amount of available beds.

2. The unit/dormitory will be supplied similar to other housing units at the correctional facility in which the Therapeutic Community is operating.
3. Except during emergency situations, the unit/dormitory will house only approved Therapeutic Community Program inmates.
4. The unit/dormitory day room or designated programming area will be comfortably furnished in order to accommodate classes, groups, and meetings. This includes the following items:
 - a. Sufficient number chairs
 - b. Dry Erase and/or Chalk Boards
 - c. Bulletin or Announcement Boards
 - d. VCR/DVD Player
5. The Therapeutic Community Addiction Service Providers will maintain a TC programming office in proximity to the TC Unit.

F. Security:

1. Officers that are assigned to work a post in the Therapeutic Community will be encouraged to participate in an orientation to Therapeutic Community treatment provided by facility addictions staff.
2. Officers should be aware of the activities and schedules of the Therapeutic Community, and without compromising their security mandates, attempt to conduct routine and non-routine security and other inspections without disrupting programming.
3. Officers should work in conjunction with the Therapeutic Community Coordinators and inform him/her of any member that has been cited for an institutional rule violation.
4. Officers should ensure that the institutional schedule is operated in conjunction with the Therapeutic Community schedule. This includes the schedule for lock-downs, counts, program calls, activities, and meals.
5. Officers shall allow inmates to visit in individual cubicles/rooms during all free inmate movement times.

6. Officers shall allow inmates to hang pictures/program oriented information posters in the common living area. The pictures/posters must be approved in advance by the Therapeutic Community Staff.
7. Hobby crafts and leatherwork will be permitted in cells provided that all applicable processes and procedures are followed.
8. Officers will not belittle or antagonize Therapeutic Community members based on their participation in the program.
9. Officers are to keep treatment information that they are exposed to during the course of their duties confidential.
10. During programming hours, the doors to the Unit will be closed to ensure confidentiality of the group process and Correctional Officers assigned to the complex will ensure that the area in front of the doors remains clear of other inmate traffic.

G. Records and Confidentiality:

1. All existing Addiction Services policies and procedures for maintenance of client records and confidentiality will be followed throughout this program in accordance with Federal Law. (42 U.S.C. § 290dd-2)
2. Additional records may be maintained documenting school, work, conduct, and therapeutic participation.
3. All issues discussed in treatment that are non-security issues and/or covered by statute, will not be disclosed and will remain confidential.
4. The facility in which the Therapeutic Community is operating will ensure that physical space is provided to allow the therapeutic treatment processes of the program to be conducted in a confidentially protected environment.

H. Program Incentives:

1. Members of the Therapeutic Community shall receive the benefit of a distinct housing unit, and substance abuse program designed to assist them in recovery from a drug or alcohol addiction.

2. Therapeutic Community members will be compensated, during scheduled Therapeutic Community programming, for their TC participation at the current rate of \$0.20 - \$0.50 an hour up to a total of 120 -140 hours per 30 day period. No more than 140 hours in compensation will be paid to any inmate during a pay period [30 days]. It is the goal of Addiction Services that TC participation is recognized as a full time activity (except is those instances where programs are part-time and inmates are required to have another program assignment). Consequently, residents in TCs should be provided the incentive of receiving the full amount of compensation consistent with facility procedures. All residents in satisfactory program status in the Therapeutic Community as verified by TC staff will be paid up to 140 hours per pay period regardless of actual in programming hours that were available during the pay period. The difference between actual hours in programming and full time program status will be paid as incentive pay or other procedures acceptable to the institutional authorities.
 - a. The Therapeutic Community Coordinator shall be responsible for completing and submitting an individual incentive pay sheet for the hour of each inmate requiring compensation for scheduled Therapeutic Community hours. Actual hours plus monthly incentive hours will be the total the individual resident will earn for that month. As an example: Total available programming hours for example month is 96. Incentive pay for this month would be 44 (which is the difference between the 96 available hours and 140 hours total). Resident A was in programming 90 of the available 96 hours. Pay for resident A would be 90 hours plus 44 hours (incentive for this month since the resident was in satisfactory program status) for a total of 136 paid hours for the month.
 - b. Each individual incentive pay sheet must be submitted on the first reasonably available working day of proceeding month of the pay month
 - c. Once a new TC resident has been admitted to the TC program, he will be added to the TC employment accountability roster and removed from any other institutional job assignment. This will be done within twenty-four hours of resident acceptance notification to the Deputy Warden or his designee.
3. Identified Therapeutic Community members who continue as program mentors: Program IV will be paid in the same manner as regular TC residents as described in paragraph 2 above except the rate of pay for mentors is currently \$.40- \$.60 an hour. With a total of 120 - 140 hours paid per month.

4. The Correctional Facility in which the Therapeutic Community is operating will make every reasonable attempt to remove any identified disincentive to an inmate's participation in the Therapeutic Community in as much as it is within the institutions power to do so.
5. Therapeutic Community programming will take precedence over all other inmate programming with appropriate consideration being afforded to the Therapeutic Community Resident and Therapeutic Community program requirements in scheduling all other activities.

I. Other Therapeutic Community Program Activities and Treatment Evolutions:

As it is a core requirement of the Therapeutic Community Treatment Model that the Community itself serves as the primary *Therapeutic Agent*, it is essential that the Community function, in as far as it is realistically possible within the facility, as a self-sustaining sub-culture responsible for its own administration in order to facilitate desirable pro-social functioning. It is also a program mandate that the Therapeutic Community be provided and incorporate program participation reinforcements, rituals, traditions, and celebrations of growth stages to the community participants. These become, then, therapeutic methodology distinct from serving a simple recreational function having limited therapeutic value or purpose. In order to meet both program mandates and to establish the Therapeutic Community as a distinct entity separate from a simple social organization and fully recognized as a treatment facility with a therapeutic mission, goal, and purpose: the Therapeutic Community will be allowed to establish their own Money Account designated as the "Therapeutic Community Account"

1. The purpose of the Therapeutic Community Account is to provide a method for residents of the TC to assume financial responsibility for providing its own reinforcements, rituals, traditions, and celebrations of growth stages in an appropriate self-sustaining manner in as far as it is able and under TC staff supervision.
2. It remains the responsibility of Addiction Services Bureau to provide basic program materials to the Therapeutic Community with the community proposing additional therapeutic activities and projects as part of the "TC as Method" model of therapy.
3. Money will be expended from the Therapeutic Community account in the form of inmate debit memos. Debit memos will be submitted to the Addiction Services Manager, and the Addiction Services manager or designee must approve the debit memo.

- a. The Therapeutic Community Treasurer will be assigned from the Creative Energy Crew of the TC Hierarchy. The TC Treasurer and the TC Senior Coordinator will be the assigned responsible inmate program officers who will co-sign the debit memos submitted.
 - b. A copy of the debit memo will be sent to the TC Treasurer through the Senior Coordinator by the Addiction Services Manager. The TC Treasurer is responsible, under TC Staff supervision, to maintain accurate financial records.
 - c. No expenditures will be made to outside accounts.
4. No outside donations will be accepted to the Therapeutic Community account without prior written approval of the Addiction Services Manager in cooperation with the Facility Programs Manager.
 5. Staff donations must receive prior approval from the Warden or Deputy Warden of the facility. No specific inmate or inmate's family may benefit from the proposed donation.
 6. Items purchased must be paid in full prior to delivery to the institution and must have prior approval from the Manager of Addiction Services with the cooperation of the Institutional Programs Manager.

J. Therapeutic Community Skills Building Projects and Concessions:

1. The Therapeutic Community may have an on-going money raising project each year.
2. In addition, the TC may operate a one-time money raising activity, such as sponsoring a tournament or concession for general population, per year. Concessions will not be held solely.
3. A proposal for each of these two types of projects or concession must be submitted to the Facility Addiction Services Manager at least 30 days in advance.
4. The Therapeutic community designated representative will tentatively reserve the gymnasium or yard, if needed, through the recreation department or relevant facility authority.

5. The Facility Addiction Services Manager or designee will review the proposals with the cooperation of the Facility Programs Manager and submit the proposal to the facility administrators for final review.
6. After review by the facility administrators and final review by the Warden, the Therapeutic Community will be notified in writing if the project was approved or denied.
7. Upon approval of the activity, the Facility Addiction Services Manager or designee will advise the Therapeutic Community and confirm the date with the recreation department. The fundraiser/TC activity will be scheduled on the Monthly Inmate Activity Calendar. Final details will be coordinated with the Therapeutic Community Program Coordinator and the Facility Programs Manager.
8. Sales will only be allowed during the designated times and dates approved. No changes or modifications will be allowed for any of the pre-approved arrangements. No debit memo's will be used by inmates to purchase items offered for sale, nor IOU's, nor credit will be honored. Only activity tokens will be accepted with pre-approved sales receipts being utilized to record the transaction.
9. Non-perishable concession items that are not sold must be stored in the Therapeutic Community Addiction Services Staff office (for a limited time) until further arrangements are made to dispose of them.
10. Any materials bought for money raising projects or otherwise must be paid for in advance by debit memo.
11. The Therapeutic community will not buy on credit. No phone orders will be made without approval of the Facility Addiction Services Manager in cooperation with the Facility Programs Manager and Business Manager.
12. The Therapeutic Community will not extend credit to other inmates.

K. Banquets, Celebrations, and Tradition in the Therapeutic Community:

1. As the quintessential element of the therapeutic community (TC) approach is *community*; celebrations, traditions, and rituals enhance community cohesiveness and reinforce individual progress. The various protocols reaffirm the TC teachings on right living and directly train new social behavior, particularly in the use of leisure time and acceptable forms of emotional expression.

2. The Therapeutic community will be allowed to hold a founding anniversary/ graduation banquet each year in addition to a Christmas Banquet. Other banquets and/or celebrations may be approved on a case-by-case basis.
3. Therapeutic Community residents and past TC graduates (alumni) still in facility residence will be expected to attend all TC banquets and celebrations.
4. Attendees must be in good standing with program requisites and have a clear institutional conduct record (no major or minor reports) for 30 days prior to the scheduled celebration. All attendees must have permission from the Facility Addiction Services Manager to attend.
5. The proposal for the banquet must be submitted to the Facility Addiction Services Manager for review by the Facility Programs Manager at least 45 days in advance for preliminary approval. The final packet including guests, food arrangements, etc. must be submitted 30 days in advance for approval.
6. A list of all outside guests attending will be submitted to the Facility Programs Manager for review 30 days in advance of the event for review, guests are subject to approval by security.
7. All guests (children included) must be on the inmate's approved visiting lists. No special visits will be allowed.
8. Food for the event may be purchased from the Corporation having the facility food service contact at the time or an approved vendor. The food must be brought into the institution by a designated and approved facility staff member. The Therapeutic community will determine the total amount and submit the required debit memo for processing in the exact amount of the purchase. The debit memo is to be verified and signed off by a member of the Therapeutic Community Addiction Services staff and processed through inmate accounts.

L. Urinalysis Testing:

Each member of the Therapeutic Community is subject to random urinalysis. Dismissal from the Therapeutic Community will be a consequence of a positive result of a urinalysis conducted by TC Staff or Custodial Staff. The Therapeutic Community urinalysis testing program as conducted by TC Addiction Services staff, remains a function of the therapeutic intervention process, is administered independently from, and confidential to, other areas not directly connected to Addiction Services, and the results are protected under federal law. (42 U.S.C. § 290dd-2)

Urinalysis testing conducted by custodial staff may additionally result in disciplinary action under established institutional policies. Residents dismissed from the Therapeutic Community for a positive urine test result will be followed up with other offered Mental Health services designed for detoxification. Urinalysis will be evaluated using a random sample technique in order to ensure the integrity of the testing process. The following procedures apply to urinalysis.

1. Each inmate of the Therapeutic Community will provide urine samples whenever requested.
2. The days of collection will be randomly chosen.
3. On the specified day, the Therapeutic Community Coordinators will identify the residents selected to be tested.
4. The urine sample will be physically collected by an appropriate staff member.
5. Inmates receiving positive results may be transferred out of the Therapeutic Community. Transfers will occur immediately upon clinical determination of the need to remove the resident from the program.
6. These procedures are independent of any urinalysis request initiated by Security staff.

M. Testing:

Inmates accepted to the Therapeutic Community may be required to complete psychometric instruments designed to provide information about themselves that will be used for statistical analysis of treatment as well as assist in development of the treatment plan. A battery of personality and socialization tests may be administered at a minimum on a pre- and post-treatment basis. This battery may include instruments like the Inmate Assessment Profile (IAP), Personal Orientation Inventory (POI), Minnesota Multiphasic Personality Inventory (MMPI), the Correctional Institutions Environment Scale (CIES) and other instruments as deemed appropriate by the Therapeutic Community Coordinator or Director Mental Health.

N. Removal from the Therapeutic Community:

Inmates may be removed from the program for:

1. Involvement in behavior that interferes with the therapeutic milieu; individual or group.

2. Involvement in an institutional disciplinary action. The institutional disciplinary process and the decision for removal from the Therapeutic Community are independent of one another. Members can still be removed from the Therapeutic Community regardless of the findings of the disciplinary process.
3. Failure to make satisfactory progress toward established treatment goals. Examples include, but are not limited to, insufficient participation in mandatory programming, and/or negative motivation and/or attitude (as determined by program staff).
4. Failure to perform satisfactorily in any part of the Comprehensive Individualized Plan that includes education or job assignment.
5. Involvement in any activity or behavior that interferes with the security, management or control of the unit or institution.
6. Failure to treat other Therapeutic Community members, associated staff members, and assigned correctional staff with the appropriate respect and/or courtesy.
7. Refusing to comply with the directions and orders provided by program and other staff members.
8. Mental disorders which may require an inmate's transfer to appropriate housing to meet his individual treatment needs if deemed clinically appropriate by Mental Health Services staff in conjunction with Addiction Services staff.

O. Removal Process:

1. Upon a finding that a Therapeutic Community member has met the criteria for removal from the Therapeutic Community, the Therapeutic Community Coordinator will notify the Deputy Warden of the facility or his designee, of the need for the physical removal of the inmate from the TC.
2. The Deputy Warden of the facility or designee shall then remove the member from the Therapeutic Community within 24 hours of the notification.
3. Former members shall not be eligible to reapply for admittance to the Therapeutic Community for a period of 60 days. The 60-day period may be waived by the Therapeutic Community Coordinator on a case-by-case basis.

P. Privately Contracted Facilities:

Private facilities that operate a Therapeutic Community as part of their Operational Contract will conform to the general guidelines of this policy, but within the terms of their contract. Every effort should be made to ensure each program mirrors those operated by the State. Private facility Program Managers/Coordinators will work closely with the NMCD Addiction Services Bureau Chief or his/her assistant in an effort to maintain compliance and consistency with state administered Therapeutic Community programs.

Q. The Addiction Services Bureau shall maintain data, evaluations, and information regarding measures of treatment outcome success.

Joe R. Williams, Secretary of Corrections
New Mexico Corrections Department

10/20/04
Date